

## PART B - FEE(S) TRANSMITTAL

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or Fax

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26875 7590 11/24/2004

WOOD, HERRON & EVANS, LLP  
2700 CAREW TOWER  
441 VINE STREET  
CINCINNATI, OH 45202

02/24/2005 LWONDIM2 00000071 233000 09971902

01 FC:1501 1400.00 DA  
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Jane A. Walker

(Depositor's name)

*Jane A. Walker*  
February 23, 2005

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/971,902	10/05/2001	Peter R. Oelgen	ZYM/09US	4028

TITLE OF INVENTION: METHOD FOR TREATING CYTOKINE MEDIATED HEPATIC INJURY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$300	\$1670	02/24/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
HAMUD, FOZIA M	1647	514-014000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Wood, Herron  
& Evans, L.L.P.

1

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

1. ZymoGenetics, Inc.  
2. University of Kentucky  
Research Foundation

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

1. Seattle, Washington  
2. Lexington, Kentucky

Please check the appropriate assignee category or categories (will not be printed on the patent):

☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

*Beverly A. Lyman*

Date February 23, 2005

Typed or printed name

Beverly A. Lyman, Ph.D.

Registration No. 41,961

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